

MULTIPLE DEPENDENT  
AND  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

FILING DATE

APPLICANT/S

09/428139

CLAIMS

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	INO.	EP.	INO.	DEP.	INO.	DEP.
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BEST AVAILABLE COPY